03-07-06

## PART B - FEE(S) TRANSMITTAL

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| INSTRUCTIONS: This for appropriate All further to   | Méspondence including the below or directed otherwise  | Patent, advance orders a   | nd notification  | of maintenance fees  | uired). Blocks 1 through 5 s<br>will be mailed to the current<br>s; and/or (b) indicating a sep  | correspondence address as  |
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| 75 Samuels K. Giles 7312 Woodsman C 3/08/2006 SDENBURZ 000  |  |  | Ce<br>I hereby certify that t<br>States Postal Service<br>addressed to the Ma  | rtificate of Mailing or Trans his Fee(s) Transmittal is being with sufficient postage for fir il Stop ISSUE FEE address PTO (571) 273-2885, on the | g deposited with the United<br>st class mail in an envelope<br>above, or being facsimile   |  |
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| APPLICATION NO.   | FILING DATE  | FIRST NAMED INVE   |  | TOR.   | ATTORNEY DOCKET NO:  | CONFIRMATION NO.   |
| 10/644,572 08/21/2003   |  | Samuel K. Giles  |  | }·   |  | 6641   |
| TITLE OF INVENTION: V   | EHICLE SECURITY SYST   | EM   |  |  |  |  |
| APPLN. TYPE   | SMALL ENTITY   | ISSUE FEE  | PI   | UBLICATION FEE   | TOTAL FEE(S) DUE   | DATE DUE   |
| nonprovisional  | YES  | ES \$700   |  | \$300  | \$1000   | 05/30/2006   |
| EXAMINER  |  | ART UNIT   |  | LASS-SUBCLASS  |  |  |
| HUNNINGS, TRAVIS R  |  | 2632   |  | 340-426000   | •  |  |
| CFR 1.363).  Change of correspond Address form PTO/SB/12  "Fee Address" indicate PTO/SB/47; Rev 03-02 Number is required.  3. ASSIGNEE NAME AND PLEASE NOTE: Unless | or more recent) attached. Use D RESIDENCE DATA TO B an assignee is identified be a 37 CFR 3.11. Completion | Correspondence (2) register of a Customer lister E PRINTED ON THE Parelow, no assignee data woof this form is NOT a sub- | the names of a gents OR, alter the name of a stered attorney egistered patented, no name with ATENT (print of the stitute for filing stitute for f | single firm (having as y or agent) and the name attorneys or agents. It ll be printed.  or type)   | a member a 2 nes of up to fino name is 3 nee is identified below, the d  | locument has been filed for  |
| Please check the appropriate  | e assignee category or catego  | ries (will not be printed o  | n the patent) :  | ☐ Individual ☐ C   | Corporation or other private gre   | oup entity Government  |
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| a. Applicant claims S.  | (from status indicated above MALL ENTITY status. See   | 37 CFR 1.27.   |  |  | LL ENTITY status. See 37 C.  | (0)  |
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| submitting the completed are this form and/or suggestions. Box 1450, Alexandria, Virginia 22313-  | oplication form to the USPT of for reducing this burden, shinia 22313-1450. DO NOT 1450.                   | O. Time will vary depend<br>tould be sent to the Chief<br>SEND FEES OR COMPI   | his collection ding upon the Information CLETED FORM   | is estimated to take 12 individual case. Any conficer, U.S. Patent and IS TO THIS ADDRES   | the public which is to file (and minutes to complete, includir omments on the amount of time and the control of | ng gathering, preparing, and<br>me you require to complete<br>artment of Commerce, P.O.<br>for Patents, P.O. Box 1450, |